

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/554623

FILING DATE
10.27.05

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
	1	/						51					
2	/						52						
3	2						53						
4	3						54						
5	1						55						
6	3						56						
7	3						57						
8	3						58						
9	1						59						
10		1					60						
11			1				61						
12			1				62						
13			1				63						
14			1				64						
15			1				65						
16			1				66						
17			1				67						
18			1				68						
19			1				69						
20			1				70						
21			1				71						
22							72						
23			1				73						
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41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			3										
TOTAL DEP.		2	14	2									
TOTAL CLAIMS			17										